FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FI.ORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # 1. Corporation Name

P97000079846 (6)

NELA CLEANER, INC

FILED Mar 16 1998 8:00am Secretary of State



Principal Place of Business Mailing Address									II OURIN HEIRH (OOIS			
Principal Place of Business 355 NW 72ND AVE. #303 MIAMI FL 33128 2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24 25				355 NW 72ND AVE. #303 MIAMI FL 33126				DO NOT WRITE IN THIS SPACE				
								3. Date Incorporated or Qualified				
							·	09/15/1997				
							-	4. FEI Number		A	pplied For	
				26				650484057			ot Applicable	
22				Suite, Apt. #, etc.				5. Certificate of Status Desired		Fee Re	Additional equired	
23	e		28					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
	}		29	, · — —				8. This corporation owes or has p	_			
24							Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent				No	
9. Name and Address of Current Registered Agent							Name	10. Name and Address of New P	Anatoran Wh			
DELGADO, NELIDA 355 NW 72ND AVE, #303						31						
					ĮE	32	Street Addr	ess (P.O. Box Number is Not Accepte	able)			
IV	AIAMI FL 33	120				33						
•												
					E	34	City		FL	85 Zip	Code	
office or r	registered ag		State of Florida, 5	Such change was	authorized	by	the corporati	oration submits this statement for the on's board of directors. I hereby according to the one of the control				
SIGNATURE												
	Signature, type d	or printed name of registe				Agen	nt signature require	ed when reinstating)	DATE		2.01.1	
12.	PD	OFFICE	S AND DIRECTO	DELETE	13.			ADDITIONS/CHANGES TO OFF		Change	RS IN 12	
TITLE		DO, NELIDA			1.1 T(TL)				L	LOURING	L. Addition	
NAME Street Address		N 72ND AVE, #:	รบร		1.2 NAM		ADDRESS					
	1	FL 33126	<i>,</i> 000				1					
CITY-ST-ZIP	1010 (171)	1 5 00 150		DELETE	1.4 CITY 2.1 TITU		1-211			Change	Addition	
NAME					2.2 NAM		}		_			
STREET ADDRESS							ADDRESS					
CITY-ST-ZIP					2. 4 CITY		• • •					
TITLE				DELETE	3.1 TITLS					Change	Addition	
NAME					3.2 NAM	1E						
STREET ADDRESS					3.3 STRE	EET A	ADDRESS					
CITY-ST-ZIP					3.4. CITY	/-ST	T-ZIP					
TITLE .				☐ DELETE	4.1 TITLE	E.				Change	Addition	
NAME .					4. 2 NAN	Æ						
STREET ADDRESS					4.3 STRE	ET A	ADDRESS					
CITY - ST - ZIP			· · · · · · · · · · · · · · · · · · ·		4.4 CITY	-ST	- ZIP		<u> </u>		,,·	
TITLE				☐ DELETE	5.1 TITLE	E			L	Change	☐ Addition	
NAME					52 NAM	E					ĺ	
STREET ADDRESS					5.3 STAE	ET A	ADDRESS					
CITY-ST-ZIP					5.4 CITY		- ZIP					
TITLE				DELETE	6.1 TITLE	E			<u> </u>	Change	Addition	
NAME					6.2 NAM	E						
STREET ADDRESS					6.3 STRE	ET A	ADDRESS					
CITY-ST-ZIP					6.4 CITY							
14. Thereby of	certify that the	Intermation suppl	ied with this filina.	does not qualify for	or the exem	noti	ion stated in 9	Section 119.07(3)(i), Florida Statutes.	I turther certify	/ that the	Information	

recess come manner information supplied with this timing does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the informatio indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Nelida Dabarolo

03-04-98